

## Grants Management Change Request Form Add or Remove Users

## Arizona Department Of Education

Grants Management Office Bin # 3
1535 West Jefferson Street Phoenix, Arizona 85007
Phone 602-542-3452 / Fax 602-542-4063 / Email grants@ade.az.gov

Date:		12/8/08							Print Reset	
Please	add the f	ollowing	individual(s) to the Gr	rants Management for	r the Fiscal Year 20	009			ACCCC .	
Entity Name:		Victory High School, Inc.: 078757000					CTDS	(9 digits number)	: 07-87-57-000	
Add GSA	Add Capture	Remove Users	First Name	Last Name	Title	Email		Phone	Original Signature For ADD GSA / Removal Reason or Note	
×			Sarah	Lors	Business manager	email@yourdomain.com		602-542-1234	Eavallas	
	$\boxtimes$		Mary	Dallman	Grants Director	email@yourdomain.com		602-542-1222		
		$\boxtimes$	John	Smith	Secretary	email@yourdomain.com		602-542-1111	No longer employed with Entity	
Authoriz	zing Perso	on:	: Peter Smith				ADE Grants Management Office Use Only			
Position:			Charter: Contract Signer			Date Pro	Date Processed: Processed By: Verified:			
Email Address:			emaill@yourdomain.com				* Authorizing Person should be superintendent or business manager for districts / charter holder or contract signer for charters, and GSA signer for			
Phone N	fumber :	ē	602-542-2222				other Entity.  * This Change Request Form requires both signatures in Blue ink from the person who is being added as GSA signer and requesting person.			
Signature (in Blue):			: Holo Swar				* Please mail a hard-copy directly to the Grants Management Office.			